

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT								
	IND	DEP	IND	DEP	IND	DEP			IND	DEP	IND	DEP	IND
1													
2	1												
3		1											
4													
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6		5											
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TOTAL IND.	32												
TOTAL DEP.	116												
TOTAL CLAIMS	148												
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TOTAL DEP.													
TOTAL CLAIMS													